



Secretary of State

STATE BOARD OF REGISTRATION
FOR PROFESSIONAL ENGINEERS AND LAND SURVEYORS
237 Coliseum Drive
Macon, Georgia 31217-3858
(478) 207-2440

Application for Certificate of Authorization For Professional Engineering Firms

All businesses offering Professional Engineering services in the State of Georgia through individual, registered professional engineers as agents, officers or partners, are required by O.C.G.A. 43-15-23 to file with the Board an APPLICATION FOR CERTIFICATE OF AUTHORIZATION to practice.

If your PE registration in Georgia entitles the firm or organization with which you are affiliated to offer to practice or practice professional engineering in Georgia, you must complete the enclosed application form and file it with the Board. There is no fee for this application.

If the firm or organization with which you are affiliated offers to practice both professional engineering and land surveying it will be necessary for it to obtain a separate Certificate of Authorization for BOTH practices. A combined Certificate of Authorization will not be issued.

Additional forms may be photocopied as required. Applications MUST be legible to be acceptable to the Board.

Do not submit this form if you already have a prior Certificate of Authorization for your firm. If you do have a prior Certificate of Authorization for this firm and it has lapsed, you will need to submit the Certification of Authorization Reinstatement Application.

To submit a change of name, address, branch addresses or to add/delete a PE, please submit the information on your letterhead as a letter of request to the Board. Do not resubmit this application form or a reinstatement application form.

The individual, who is in responsible charge of the professional engineering performed or offered to be performed in Georgia, must be currently licensed as a Georgia Professional Engineer and must sign the form. If the firm has branch office, each branch must have a full-time Professional Engineer and must be listed on the form.

Please indicate the FEIN (Federal Identification Number) in the appropriate blank as this number will be used for renewal purposes.

Please mail this application in to the Board office at the address above. Faxed applications will not be accepted.

Fees associated with a Certificate of Authorization:

Initial registration: No Fee
Biennial Renewal (June 30 of even-numbered years): \$10
Reinstatement of Lapsed Certificate: \$500

Application is hereby made for a certificate of authorization to practice or offer to practice **professional engineering** in Georgia as defined in Chapter 15 of Title 43 of the Official Code of Georgia.

Legal Name of Business:

FEIN:

DBA (If applicable):	

Physical Address of Principle Place of Business:

Street:	Suite:
City:	State: Zip:
Contact e-mail:	Telephone # ()
<i>Mailing Address (if different than physical address):</i>	
Street or PO Box:	
City:	State: Zip:

Are engineering services being offered or performed in Georgia based out of the principle place of business?

_____ YES _____ NO

If NO, then skip to next page regarding Branch offices .

If yes, then list below the Georgia PE who is based out of the principle place of business and will be primarily responsible for engineering services offered by this firm in Georgia.

Name:	Georgia PE #:	
<i>PE's Physical Home Address:</i> Street:	Is this PE a full time W-2 employee at this firm?	____ YES ____ NO
City: State: Zip:	How many hours a day does this PE spend in the office?	____ hrs.
	How many days a week does this PE spend in the office?	____ days
	Approximately how many miles is this PE's home from the office?	____ mi.

Please be advised that for each office location (principle place of business and/or branch office) where professional engineering services are being offered or performed for projects in Georgia, there must be a full-time, continuing, bona fide Georgia licensed Professional Engineering working at that location and in responsible charge.

Make copies of this page as necessary for each branch office offering engineering services in Georgia. If the firm has branch office locations, not located in Georgia and are NOT offering services in Georgia, it is not necessary to list them.

If the firm does not have branch offices, then skip this page and do not send it with the application.

Legal Name of Business as listed on previous page

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Branch Office offering engineering services in Georgia:

Street:	Suite:
City:	State: Zip:
Contact e-mail:	Telephone # ()
Mailing Address (if different than physical address):	
Street or PO Box:	
City:	State: Zip:

For this Branch office, list below the Georgia PE who is primarily responsible for engineering services offered by this branch office in Georgia.

Name:	Georgia PE #:	
PE's Physical Home Address: Street:	Is this PE a full time W-2 employee at this firm?	____ YES ____ NO
City: State: Zip:	How many hours a day does this PE spend in the office?	____ hrs.
	How many days a week does this PE spend in the office?	____ days
	Approximately how many miles is this PE's home from the office?	____ mi.

List below other Georgia Professional Engineers in the firm who are full time, continuing, bonafide and active principals, officers, partners or individuals acting on behalf of the business (use additional sheets, if necessary.)
Leave out of application if this page is not necessary.

Name:	Georgia PE #:	
PE's Physical Home Address: Street:	Is this PE a full time W-2 employee at this firm?	<input type="checkbox"/> YES <input type="checkbox"/> NO
City: State: Zip:	How many hours a day does this PE spend in the office?	<input type="text"/> hrs.
Does this PE primarily work in the principle place of business or a branch office?	How many days a week does this PE spend in the office?	<input type="text"/> days
If branch, which one?	Approximately how many miles is this PE's home from the office?	<input type="text"/> mi.

Name:	Georgia PE #:	
PE's Physical Home Address: Street:	Is this PE a full time W-2 employee at this firm?	<input type="checkbox"/> YES <input type="checkbox"/> NO
City: State: Zip:	How many hours a day does this PE spend in the office?	<input type="text"/> hrs.
Does this PE primarily work in the principle place of business or a branch office?	How many days a week does this PE spend in the office?	<input type="text"/> days
If branch, which one?	Approximately how many miles is this PE's home from the office?	<input type="text"/> mi.

Name:	Georgia PE #:	
PE's Physical Home Address: Street:	Is this PE a full time W-2 employee at this firm?	<input type="checkbox"/> YES <input type="checkbox"/> NO
City: State: Zip:	How many hours a day does this PE spend in the office?	<input type="text"/> hrs.
Does this PE primarily work in the principle place of business or a branch office?	How many days a week does this PE spend in the office?	<input type="text"/> days
If branch, which one?	Approximately how many miles is this PE's home from the office?	<input type="text"/> mi.

Name:	Georgia PE #:	
PE's Physical Home Address: Street:	Is this PE a full time W-2 employee at this firm?	<input type="checkbox"/> YES <input type="checkbox"/> NO
City: State: Zip:	How many hours a day does this PE spend in the office?	<input type="text"/> hrs.
Does this PE primarily work in the principle place of business or a branch office?	How many days a week does this PE spend in the office?	<input type="text"/> days
If branch, which one?	Approximately how many miles is this PE's home from the office?	<input type="text"/> mi.

Name:	Georgia PE #:	
PE's Physical Home Address: Street:	Is this PE a full time W-2 employee at this firm?	<input type="checkbox"/> YES <input type="checkbox"/> NO
City: State: Zip:	How many hours a day does this PE spend in the office?	<input type="text"/> hrs.
Does this PE primarily work in the principle place of business or a branch office?	How many days a week does this PE spend in the office?	<input type="text"/> days
If branch, which one?	Approximately how many miles is this PE's home from office?	<input type="text"/> mi.

List below the name, residence address and title of each of the officers, board of director members, partners and/or principals for the corporation, Professional Corporation, partnership, association, or other entity making this application. For each such person list his/her current Georgia Professional Engineer registration number, if any.

Name & Address	Title	Georgia PE #, if applicable:

Certification: I, _____, as a currently active Georgia registered professional
Print Your Name
 engineer and authorized to act on behalf of _____, hereby certify that the
Print Company Name
 statements made herein and attached hereto as part of this application are true and correct as of this date and any
 change will be filed with the State Board of Registration for Professional Engineers and Land Surveyors within 30
 days of the effective date of the change.

 Signature Title GA PE#

Date of Application: _____